

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
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Office Use Only
E-MAIL CENTER

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

OUTFRONT MEDIA INC. POLITICAL ACTION COMMITTEE (OPAC)

ADDRESS (number and street)

2350 KERNER BLVD., SUITE 250



(Check if address
is changed)

SAN RAFAEL

CA

94901

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

fecform1@nmgovlaw.com



(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

2. DATE

MM / DD / YYYY
01 / 05 / 2015

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jason D. Kaune

Signature of Treasurer

J. D. Kaune

Date

MM / DD / YYYY
01 / 05 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought:

House

Senate

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6')

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

Write or Type Committee Name

OUTFRONT MEDIA INC. POLITICAL ACTION COMMITTEE (OFPAC)

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

OUTFRONT MEDIA INC.

Mailing Address

405 LEXINGTON AVENUE

NEW YORK

NY

10174

CITY

STATE

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

JASON D. KAUNE

Mailing Address

2350 KERNER BLVD., SUITE 250

SAN RAFAEL

CA

94901

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

415

389

6800

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

JASON D. KAUNE

Mailing Address

2350 KERNER BLVD., SUITE 250

SAN RAFAEL

CA

94901

Title or Position

Treasurer

CITY

STATE

ZIP CODE

Telephone number

415

389

6800

Full Name of
Designated
Agent

ARMEEN KOMEILI

Mailing Address

2350 KERNER BLVD., SUITE 250

SAN RAFAEL

CITY

CA

STATE

94901

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

415

389

6800

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BANK OF MARIN

Mailing Address

504 TAMALPAIS DRIVE

CORTE MADERA

CITY

CA

STATE

94925

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE



Express

Extremely Urgent

Page 1 of 1

From: (415) 389-6800
CATE CASTONGUAY
NIELSEN MERKSAMER ET AL
2350 KERNER BOULEVARD
SUITE 250
SAN RAFAEL, CA 94941

Origin ID: SRFA



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SHIP TO: (202) 694-1100
BILL SENDER
FEDERAL ELECTION COMMISSION
FEDERAL ELECTION COMMISSION
999 E STREET N W

WASHINGTON, DC 20463

Ship Date: 05 JAN 15
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Delivery Address Bar Code



Ref # 8357.01
Invoice #
PO #
Dept #

TUE - 06 JAN 10:30A
PRIORITY OVERNIGHT

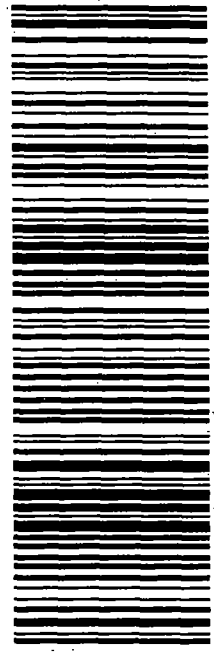
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204

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10:30
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i>	Shipping Date <i>1/5/2015</i> Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JN</i> PREPARER	<i>1/6/2015</i> DATE PREPARED